

CIVIL DISTRICT COURT FOR THE PARISH OF ORLEANS
STATE OF LOUISIANA

No.: _____ DIVISION _____

VERSUS

FILED: _____
DEPUTY CLERK

AFFIDAVIT OF SERVICE VIA CERTIFIED MAIL

STATE OF _____ [STATE WHERE SIGNED AND NOTARIZED]

PARISH/COUNTY OF _____ [PARISH/COUNTY WHERE SIGNED AND NOTARIZED]

BEFORE ME, the undersigned notary public, personally came and appeared:
_____, Plaintiff / Defendant (*circle one*) in
the above-captioned matter, who, after being duly sworn, did state that:

1. A certified copy of the _____
[TITLE OF PLEADING SERVED] was mailed to Plaintiff / Defendant (*circle one*),
_____ [NAME OF PARTY BEING SERVED]
at his / her (*circle one*) last known address: _____
_____ [ADDRESS WHERE CERTIFIED MAIL WAS SENT] via
U.S.P.S. Certified Mail.
2. That the mailing was accepted and signed on behalf of Plaintiff / Defendant (*circle one*)
by _____ [NAME OF PERSON WHO SIGNED],
on _____ [DATE OF DELIVERY], as reflected on the proof of
delivery attached as Exhibit "A."

(AFFIANT'S SIGNATURE)
Forms prepared through collaboration of Self Help Resource Center Volunteers and the Civil District Court for the Parish of Orleans. No representation or enrollment as counsel is expressed or implied.

(AFFIANT'S FULL PRINTED NAME)

(STREET ADDRESS)

(CITY/STATE/ZIP CODE)

(TELEPHONE NUMBER)

SWORN TO AND SUBSCRIBED before me this ____ day of _____, 20____, at _____, Louisiana.

NOTARY PUBLIC

NOTARY PUBLIC No.: _____

PRINTED NAME: _____

MY COMMISSION EXPIRES: _____

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EXHIBIT "A"

*Attach original return receipt HERE
(green card from USPS)*